



U.S. Department  
of Transportation  
**Federal Aviation  
Administration**

## INFORMATION FOR APPLICANT

### Application For An Airman Certificate and/or Rating

---

#### Privacy Act Statement

---

Information requested on this form is solicited under the authority of Title 49 of the United States Code (Transportation) sections 109(9), 40113(a), 44701-44703, and 44709 (1994), formerly codified in the Federal Aviation Act of 1958, as amended, and Title 14 of the Code of Federal Regulations (CFR), Part 67, Medical Standards and Certification. Submission of this information is mandatory and incomplete submission will result in delay of consideration or denial of application for an airman medical certificate.

The purpose of this information is to determine whether an applicant meets Federal Aviation Administration medical requirements to hold an airman medical certificate for further consideration under 14 CFR 11.53 and 67.401. It is also used to depict airman population patterns and to update certification procedures and medical standards. The information collected on this form becomes a part of the Privacy Act System of Records DOT/FAA 847, General Air Transportation Records on Individuals, and is provided the protection outlined in the system's description as published in the *Federal Register*.

#### Paperwork Reduction Act Statement:

The information collected on this form is necessary to determine applicant eligibility for flight engineer or flight navigator certificates. The information is used to determine certification eligibility. We estimated that it will take 6 minutes to complete the form. The information collection is required to obtain a benefit. The information collected becomes part of the Privacy Act system of records DOT/FAA 847, General Air Transportation Records on Individuals. Please note that an agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number associated with this collection is 2120-0007.

**Tear off this cover sheet before submitting this form.**

# Application For An Airman Certificate and/or Rating

☐ Flight Engineer      ☐ Flight Navigator      ☐ Aircraft Dispatcher  
☐ Reciprocating Engine Powered      ☐ Control Tower Operator      ☐ Reissuance of Certificate  
☐ Turbopropeller Powered      ☐ VFR Tower Rating      ☐ Additional Rating  
☐ Turbojet Powered      ☐ Non-Radar Approach Control Tower Rating

|                                |                          |                     |
|--------------------------------|--------------------------|---------------------|
| 1. TYPE OF AIRCRAFT TO BE USED | 2. TIME IN THIS AIRCRAFT | 3. NAME OF EMPLOYER |
|--------------------------------|--------------------------|---------------------|

|                               |  |                  |  |                   |  |  |
|-------------------------------|--|------------------|--|-------------------|--|--|
| A. NAME (First, Middle, Last) |  |                  |  |                   |  | K. PERMANENT MAILING ADDRESS<br>(Include Zip Code) |
| B. SOCIAL SECURITY NO.        |  | C. DATE OF BIRTH |  | D. HEIGHT         |  |  |
| E. WEIGHT                     |  | F. HAIR          |  | G. EYES           |  | TELEPHONE NO.                                      |
| H. SEX                        |  | I. NATIONALITY   |  | J. PLACE OF BIRTH |  |  |

A. ☐ Pilot ☐ B. Flight Navigator ☐ E. Ground Instructor  
☐ Airline Transport ☐ Flight Instructor ☐ C. Control Tower Operator ☐ F. Aircraft Dispatcher  
☐ Commercial ☐ Private ☐ D. Flight Engineer ☐ G. Mechanic

## Date \_\_\_\_\_

Applicant's Signature

7. I consider the above applicant ready to take the test for which he/she is applying:

☐ A. Oral Test

01

☐ C. Practical Test

*Aircraft Dispatcher*

|         |                        |  |                         |
|---------|------------------------|--|-------------------------|
| D. Date | Instructor's Signature | Instructor's Certificate No. & Expiration Date | Grade & Certificate No. |
| E. Date | Instructor's Signature | Instructor's Certificate No. & Expiration Date | Grade & Certificate No. |

|  | Inspector | Examiner | Signature | Date |
|--|-----------|----------|-----------|------|
| Oral                                     |           |          |           |      |
| Practical Test<br>Aircraft Dispatcher    |           |          |           |      |
| Practical Test<br>Control Tower Operator |           |          |           |      |
| Simulator Check                          |           |          |           |      |
| Aircraft Flight Check                    |           |          |           |      |

☐ Temporary Airman Certificate Issued      ☐ Notice of Disapproval of Application Issued      ☐ Examiner's Action Accepted

|      |     |        |  |     |                       |     |     |  |     |      |     |       |     |        |            |  |       |        |  |                                  |   |  |  |  |
|------|-----|--------|--|-----|-----------------------|-----|-----|--|-----|------|-----|-------|-----|--------|------------|--|-------|--------|--|----------------------------------|---|--|--|--|
| DATE |     |        |  |     | INSPECTOR'S SIGNATURE |     |     |  |     |      |     |       |     |        | FAA OFFICE |  |       |        |  |                                  |   |  |  |  |
| CP   | REG | OFFICE |  | COM | ISS                   | ACT | EMP |  | TRN | M.T. | DIS | CLASS | SEX | RATING |            |  | STATE | COUNTY |  |                                  | <input type="checkbox"/> Aircraft Dispatcher <input type="checkbox"/> IFO Mailing |  |  |  |
|      |     |        |  |     |                       |     |     |  |     |      |     |       |     |        |            |  |       |        |  |                                  | <input type="checkbox"/> Special Mailing <input type="checkbox"/> Correspondence  |  |  |  |
|      |     |        |  |     |                       |     |     |  |     |      |     |       |     |        |            |  |       |        |  | <input type="checkbox"/> Airmail |   |  |  |  |

**10. Practical Test Report****Grading Legend** (All applicable items must be graded S or U)

Explain in "Remarks" all items which are not graded.

S--Satisfactory, U--Unsatisfactory

| Item No.   | A. Flight Engineer                    | Grade    |           | Item No.                                | C. Aircraft Dispatcher                                      | Grade    |           |
|--|---------------------------------------|----------|-----------|---|---|----------|-----------|
|  |                                       | Examiner | Inspector |   |   | Examiner | Inspector |
| 1  | Equipment Examination (Oral)          |          |           | 1                                       | Aircraft  |          |           |
| 2  | Preflight Inspection                  |          |           | 2                                       | Air Routes and Airports                                     |          |           |
| 3  | Normal Operating Procedures           |          |           | 3                                       | Altimeters  |          |           |
| 4  | Abnormal Operating Procedures         |          |           | 4                                       | Weather Analysis  |          |           |
| 5  | Performance Data and Cruise Control   |          |           | 5                                       | Airman's Information Manual                                 |          |           |
| 6  | Trouble Shooting                      |          |           | 6                                       | Dispatch and Assistance                                     |          |           |
| 7  | Emergency Procedures                  |          |           | 7                                       | Emergency Procedures  |          |           |
| 8  | Forms and Records                     |          |           | Item No.                                | D. Control Tower Operator                                   | Grade    |           |
| 9  | Post Flight                           |          |           |   |   | Examiner | Inspector |
| 10   | Crew Coordination                     |          |           |   |   |          |           |
| 11   | Judgement                             |          |           |   |   |          |           |
|  |                                       |          |           |   |   |          |           |
| Item No.   | B. Flight Navigator                   | Grade    |           | VFR TOWER RATING                        |   |          |           |
|  |                                       | Examiner | Inspector | 1                                       | The Control Tower   |          |           |
|  |                                       |          |           | 2                                       | The Airport   |          |           |
|  |                                       |          |           | 3                                       | The Control Zone  |          |           |
|  |                                       |          |           | 4                                       | Notice to Airmen  |          |           |
| 1  | Equipment (Oral)                      |          |           | 5                                       | Weather Facilities and Procedures                           |          |           |
| 2  | Equipment Check                       |          |           | 6                                       | A Demonstration of Ability to Control Air Traffic Under VFR |          |           |
| 3  | Preflight Training                    |          |           | NON-RADAR APPROACH CONTROL TOWER RATING |   |          |           |
| 4  | Normal Navigation Procedures          |          |           | 1                                       | Air Traffic Control Facilities                              |          |           |
| 5  | Knowledge of Navigation Methods       |          |           | 2                                       | Air Navigation Facilities                                   |          |           |
| 6  | Co-ordination of Navigational Methods |          |           | 3                                       | Use of Airman's Information Manual                          |          |           |
| 7  | Emergency Procedures                  |          |           | 4                                       | Holding Procedures  |          |           |
| 8  | Co-ordination of Duties               |          |           | 5                                       | Approach Procedures   |          |           |
| 9  | Crew Co-ordination                    |          |           | 6                                       | Missed Approach Facilities                                  |          |           |
| 10   | Judgement                             |          |           | 7                                       | Alternate Airports  |          |           |
| <b>11. Route of Flight Check</b>                     |                                       |          |           | 8                                       | Search and Rescue Procedures                                |          |           |
| From   | To                                    | Hours    |           | 9                                       | A Demonstration of Ability to Control Air Traffic Under IFR |          |           |
|  |                                       | Day      | Night     | 10                                      | Airport Identification                                      |          |           |
| <input type="checkbox"/> Airmans Identification (ID) |                                       |          |           |   |   |          |           |
| Form of ID   |                                       |          |           |   |   |          |           |
| Number   |                                       |          |           |   |   |          |           |
| Expiration Date                                      |                                       |          |           |   |   |          |           |

**10. Remarks**